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SUBJECT: POTENTIAL ABUSE IN PROPOSED ORGAN DONATION LAW

Classified By: Political Counselor David Rundell
for reasons 1.4(b) and (d).

11. (C) SUMMARY: Following imminent approvals from the Saudi Organs Transplant Center (SOTC), the Prince Salman Charitable Center for Kidney Diseases, and the Medical Services Council (MSC), the SAG will implement a new organ donation regulation allowing for live donors to donate their organs to unrelated persons. Ministry of Health and King Faisal Specialist Hospital Organ Donation Coordinator Abdullah al-Enazi (strictly protect) denounced the proposed law for lacking proper controls. Based on his recent experience with donation cases throughout the Kingdom, Al-Enazi stated that he fears that allowing unrelated persons to donate organs -- including kidney and liver transplants -- may lead to coerced donations from foreign domestic workers as well as "temporary marriages" to foreigners in order to secure a live donor.
END SUMMARY.

Background on Organ Donation in Saudi Arabia

12. (U) Under current Saudi Arabian law Saudi nationals and expatriates can donate organs; however, beneficiaries must be Saudi nationals. If the donor is deceased, then no relation to the recipient is required. However, recipients must be related -- either through blood or marriage -- to live donors. (Note: If a donor is related through marriage, the marriage must have been legal for at least one year prior to a live organ donation. End Note.) Transplants occur with all major organs, except skin and corneas.

13. (U) Several years ago the Ministry of Health partnered with King Faisal Specialist Hospital (KFSH) -- the leading organ transplant center in the Middle East, and only one of three centers in the Kingdom -- to create the Ministry's organ donation program. The program has several components: (1) increasing public awareness about the benefits of organ donation; (2) educating intensive care unit (ICU) hospital staff on the benefits and processes involved in organ donations; (3) identifying potential donors in ICUs in dozens of hospitals throughout Saudi Arabia; (4) maintaining the list of needy recipients; and (5) coordinating the transport, hospital access, and operational needs of organ transplant surgery.

14. (U) This program has a mobile team of staff serving forty public and private hospitals in Riyadh Province. The mobile team is responsible for all of the above activities, but mainly focuses on securing permission from the families of the deceased or dying to obtain organs for donation. Their work depends on the cooperation and notification by the various ICUs-- the reason why increased outreach programs are critical to their success. The increased number of education programs in 2006 had a direct effect on the number of donations-- 73 in 2006 up from 25 in 2005 in Riyadh alone. Due to the success of the program, KFSH expanded its

resources, including medical staff, operating theaters, and bed capacity.

Major Issues in Organ Donation

15. (C) In a February 11 meeting with PolOff, KFSH Organ Donation Coordinator Abdullah al-Enazi stated that religious concerns and ignorance about the process of organ donation are the leading impediments facing the organ donation program. Organ donation is a relatively new concept in Saudi Arabia and many refusals to grant donation stem from religious concerns. As a general rule, al-Enazi said that Saudis do not believe in the concept of "brain dead." If a person is breathing, according to al-Enazi, it is because Allah wills it -- not the machine breathing for the individual. As a result, families are often unwilling to discuss the potential for organ donation until it is too late to save the organs. Al-Enazi told PolOff in a meeting several months ago that often when his mobile team is working with a family to secure an organ donation, religious conservatives ("Mutaawa'iin") will arrive and effectively prevent the family from giving permission. According to al-Enazi, the hospital staff are often the ones to call the Mutaawa'iin into the ICU. Throughout the past eight months al-Enazi has witnessed a decline in "Mutawaa'iin" presence in the ICUs and a decline in the hospital staff opposing the efforts to secure organ donations. Interestingly, receiving organs as a recipient has not been a religious concern.

16. (C) Additionally, al-Enazi said that hospital staff are often over-worked and do not care for the "brain dead" patients as much as other patients. He said that this is a fatal mistake because organs need to be cared for in order for a successful transplant; if the hospitals do not work to preserve the organs, then the need to obtain permission for the donation is moot. Fortunately, increased awareness has stemmed some of these problems, and on the morning of February 10 -- the day before PolOff met with al-Enazi -- a father "pulled the plug" on his "brain dead" son for the first time in Saudi Arabia. This willingness to "pull the plug" is a new concept in the Kingdom and potentially ground-breaking for organ donation purposes. Al-Enazi expressed hope that this action indicates a new wave of thinking about the religiously controversial subject of organ donation.

New Law Brings Progress with Significant Risks

17. (C) In early February the SAG proposed a new regulation aimed at increasing the overall number of transplants and access to transplants for all needy recipients. The media announced this proposed law on February 7, citing its elements generally -- namely that live donors can donate their organs to unrelated persons either designated or anonymous recipients. According to media reports the new law would provide 200 to 400 kidneys for transplant in the first year, with the goal of 600 to 700 per year-- an increase of over 100 percent in the first year alone. The regulation needs to be approved by SOTC, Prince Salman Charitable Center for Kidney Diseases, and finally by the Ministry of Health's MSC. The proposed law includes incentives for the donors; however, the media interview did not delineate the incentives. Al-Enazi -- a member of the MSC -- gave more details on the incentives, including that the SAG will be authorized to pay amounts of USD15,000 or more to donors in order to encourage live organ donations.

18. (C) Although the law would provide a significant increase in the number of kidneys available for donation, al-Enazi expressed repeatedly that "encouraging live donations only drives more people to be sick in the future." Further al-Enazi stated that "paying people for their organs is unethical." In his experience people already try to abuse the current regulations by attempting to use "temporary

marriages" as a means of securing a "related" donor; he even recounted a story of a woman who tried to get his committee to accept a kidney donation from her Egyptian driver because, as she told him, "he is like family. Plus, we will pay him SR 5,000." Al-Enazi expressed strong concern that the new regulation does not include stringent enough controls to (1) stop "temporary marriages" for the purpose of organ donation, and (2) the purchase of organs from foreign domestic workers living in Saudi Arabia-- or even regulatory mechanisms to prevent individuals from entering the Kingdom for this purpose. He said that he would support the law if it was restricted to Saudi national donors only, thus preventing potential abuses of expatriate workers, but there are no plans to amend the law to reflect his concerns. Al-Enazi said that he has openly opposed this new regulation to the Minister of Health and as a result of his opposition, the Ministry of Health has instructed him to only deal with "brain dead" patients, cautioning him to stay away from potential live donors and their families. (Note: The Ministry of Health has engaged him to work on a new organ donation program with Prince Salman to create a new charitable center for liver transplants. The new program will be announced at Kingdom Hospital by Prince Salman and Minister of Health Hamad Al-Manaa on March 14. End Note.)

¶9. (C) COMMENT: There is no evidence that properly screened kidney donations reduce the donors life expectancy. Many Saudis already travel to India or Pakistan where kidney transplants can be legacy purchased from non-related donors. However, the new organ donation system does raise concerns over the strictness and transparency of Saudi screening procedures.

¶10. (C) It is also clear that religious beliefs and customs continue to be a major driver in every aspect of Saudi life -- including health care and, more specifically, organ donation. However, the increase of organ donations -- particularly by Saudi donors -- and outreach programs, the new proposed regulation, and the decline of "Mutawaa'iin" interference with the organ donation process are small indicators of growing religious "flexibility." That some Saudis are clearly willing to adjust to the opportunities provided by modern medicine is a promising sign that development outside the scope of conservative Wahhabiism is possible. Moreover, the SAG's recent announcement preventing the "Mutaawa'iin" from entering hospitals without pre-authorization demonstrates that the progress made in the organ donation arena can continue. END COMMENT.
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